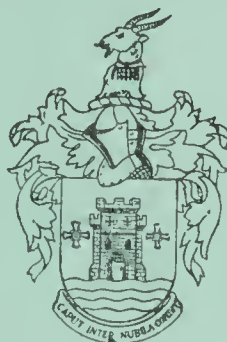


1964



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COUNTY BOROUGH OF GATESHEAD

ANNUAL REPORT

OF THE
Principal
School Medical Officer
FOR YEAR 1964

JAMES GRANT, M.D., Ch.B., D.P.H.
(GLASGOW)

MEDICAL OFFICER OF HEALTH
AND PRINCIPAL SCHOOL MEDICAL OFFICER

Norman Ward Ltd., Low Fell.

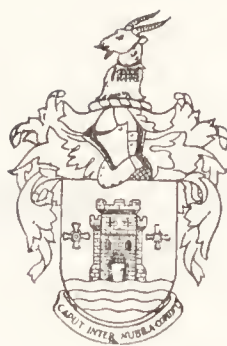
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JAMES GRANT, M.D., Ch.B., D.P.H.
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MEDICAL OFFICER OF HEALTH
AND PRINCIPAL SCHOOL MEDICAL OFFICER

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Vice-Chairman — COUN. H. J. LUXTON

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STAFF OF SCHOOL MEDICAL SERVICE

Medical Officer of Health and Principal School Medical Officer — JAMES GRANT, M.D., CH.B., D.P.H.

Deputy Medical Officer of Health and Senior School Medical Officer — JEAN M. BAINBRIDGE, M.B., B.S., D.R.C.O.G., D.P.H., LL.B.

School Medical Officers (and Assistant M.O.'s H.) — MARION HARRISON, M.B., B.S., D.P.H. WINIFRIDE BILLINGTON, M.B., CH.B., D.P.H., PHILIP C. BARRY, L.R.C.P.

Ophthalmic Surgeon (part-time) — *J. S. ARKLE, F.R.C.S.

Orthopaedic Surgeon (part-time) — ‡A. E. BREMNER, M.B., CH.B., F.R.C.S.

Physiotherapist — MRS. M. ROSE, M.C.S.P. (resigned 29.2.64)

Remedial Gymnast (part-time) — ‡T. D. MIDGLEY, M.S.R.G.

Orthoptist — Vacant.

Speech Therapists — Vacant.

Principal School Dental Officer — JOSEPH WHITEHOUSE, L.D.S.

Dental Officers — MRS. I. F. JONES, L.D.S., MISS TERESA ROSSI, B.D.S., MR. R. ROBSON, L.D.S. (commenced 6.1.64).

Dental Surgery Assistants — MISS M. CESSFORD, MISS S. P. THOMPSON, MRS. E. DANBY, MRS. H. TYRRELL.

Dental Technicians — T. W. CURTIS, J. GILHOME.

Health Visitors and School Nurses — I BRADLEY (supt.), M. DAGLISH (Sen. H.V.), D. C. JOHNSON (Sen. H.V.), E. WISE, M. CRAGGS, J. TURNBULL, A. MULLEN, R. GARDNER, S. GILLEY, E. BAXTER, M. FAIRS, M. MCMANEMY, M. B. MAIN, M. INCE, M. MORRELL, A. BARTLEY, M. M. MAW (resigned 11.5.64), J. A. BARWICK, M. M. CUNNINGHAM, A. U. NNAJI, E. DUKE, F. McDONALD, M. A. HASWELL, M. EVANS (Commenced 4.8.64), C. A. WILKINSON (nee Porter — resigned 5.7.64)

Nursing Assistants — W. CRAIG, P. M. JACKSON, D. McVEIGH.

Clerical Staff — N. CRAIG, MRS. M. GIBSON, MRS. M. WATSON, MRS. K. M. HUGHES (resigned 28.4.64), MRS. B. CHANEY, MISS G. COOPER, MISS M. FORAN (commenced 8.6.64).

* *Provide service under Supplementary Ophthalmic Treatment Regulations.*

‡ *Indicates by arrangement with the Newcastle upon Tyne Regional Hospital Board.*

ANNUAL REPORT

OF THE
PRINCIPAL
SCHOOL MEDICAL OFFICER
FOR THE YEAR 1964

To the Chairman and Members of the Education Committee

In submitting the annual report of the School Medical Officer for the year 1964, I am conscious that I ought to write something of the great changes that have taken place in the medical aspects of the educational service since my appointment in 1936. My impressions are principally of the changed nutritional state of the children due to the better economic conditions of the town, the disappearance of the septic skin diseases and the serious and often fatal inroads of the common infectious diseases, the elaboration of special educational facilities for the handicapped children, and finally the impact of the domiciliary and hospital provisions of the National Health Service which have made some people question the necessity for a school medical service at all.

In 1936, nutrition surveys were made every six months after 1935, and there can be no doubt that with nearly 2 per cent of the children classified as badly nourished and $17\frac{1}{2}$ per cent. as slightly subnormal physically there was visible evidence of the economic distress that had affected the community in the third decade of the 20th century. To combat this, extra nourishment was supplied to those recommended by the school doctors, either in the form of milk or meals in school. No fewer than 6,500 children out of the total school population of 20,000 were recommended to receive some form of extra nourishment. In 1964, only 17 children (0.4%), were found at routine inspection to be badly nourished. The children with skin diseases requiring treatment in 1936 numbered 3,099, nearly all the conditions being in the nature of sepsis. In 1964, only 307 children were noted as requiring treatment for skin sepsis. Comparison of findings of school medical inspection show a similar decline in the number of cases of nasopharyngeal disease, of septic conditions of the ear and of childhood tuberculosis. Thus, in 1936, 239 children were included on the tuberculosis register. 55 with active pulmonary tuberculosis and 34 with active non-pulmonary disease, as compared with only 6 children having treatment for tuberculosis during 1964. In 1936, 77 per cent. of the children inspected required dental treatment, whereas in 1964 only 52 per cent. were in this category. In 1936, the only preventive measure against infectious disease was vaccination against smallpox, whereas vaccination and immunisation against all the common infectious diseases is perhaps the most important work of the school medical staff in 1964. In 1936, no fewer than 39 school children died during the year, 3 from diphtheria, 1 each from measles, scarlet fever, whooping cough and pulmonary tuberculosis, 9 from non-pulmonary tuberculosis, 5 from heart disease, 6 from anaemia, 2 from enteritis, 2 from appendicitis, 3 from nephritis, 2 from rheumatic fever, 1 from splenic anaemia and 2 from ill-defined causes. In 1964, there were only 3 deaths of school children, 1 from a brain tumour and 2 from pedal cycle accidents.

The foregoing raises the question as to how these enormous changes were achieved. First and foremost, one must give the greatest credit to Fleming for his discovery of penicillin and the exploitation by others of his discovery. Secondly, the improved economic conditions of the community must have had its influence in the correction of malnutrition, but other measures such as the foundation of the Team Valley Trading Estate, the scheme for the supply of milk and meals in schools, the availability of free medical and hospital care, have all played their part in what is almost a miracle. In these changes for the better, the local education authority can take pride in the provision of facilities for the handicapped children, beginning with the Open Air School foundation in 1937 and continuing through the years to the provision for physically handicapped children, the residential provision for educationally subnormal children and the day school provision of special classes. There has also been, over the years, the abandonment of schools which had outlived their usefulness and their replacement by the airy, well ventilated and well built buildings that are to be noted in the suburbs of the town. It would not be out of place to mention the appearance of three new grammar schools and one technical college during these eventful years which I have had the privilege of observing and recording.

It is necessary to acknowledge that in the work of the school medical service we had the powerful backing of the Education Committee, its directors and their staffs. We also enjoyed the full collaboration of the head teachers and their subordinates and also of the school welfare department. So far as the school medical department is concerned, one must make mention of the series of well qualified doctors who passed through the service, leaving us mainly to go to higher appointments, and to the very efficient work of our health visitors who are also school nurses. The work of the dental officers has also been of the highest standard, although the necessity to employ large numbers has gradually declined with the development of family dental practice. Finally, one must acknowledge the unseen but detailed and often dull routine clerical work which has been executed in the school medical office.

To all the interests mentioned, I am deeply indebted.

Your obedient Servant,

JAMES GRANT,

Principal School Medical Officer.

1. STAFF

Changes in the medical staff were as follows:—The service continues to be chronically short of qualified staff in nearly all departments. During the year we had a continuous shortage of one school medical officer to replace Dr. Mackenzie, who resigned in 1962. The other male medical officer, Dr. Barry, began his studies for the D.P.H., and so for part of the year was only available roughly half-time during the university teaching term. Dr. Billington, who had served with us as a part-time school medical officer doing her D.P.H., was successful in obtaining the qualification and so was available for more than half of the year in a full-time capacity. Nevertheless, we had to make do with the sessional services of a number of married female practitioners and with the excellent help of Dr. C. Neubauer, a retired medical consultant.

In the dental service, we were able to return to the anticipated strength of four dental officers, including the chief dental officer. Of these, two are based at the Greenesfield Health Centre and one at the Carr Hill and Wrekenton Health Centres respectively. All the dental staff, of course, are employed to roughly one third of their time on the work of caring for the priority classes, namely the expectant mothers and pre-school children, in addition to the school children. The dental technicians remained at two, and from the school dental point of view were able to manufacture all the orthodontic appliances that were required for this work.

Throughout the year we were short of the two speech therapists and the orthoptist and for nearly all the year of the services of the physiotherapist. It is thought that with these specialist workers the relatively low remuneration is a great obstacle to the recruitment and training of the necessary staff for the health services.

We have never been able to reach full strength of the health visiting and school nursing service, and 1964 was no exception. Every effort is being made to bring the numbers up to the recognised standard of 26, and four student health visitors began their studies in the training centre in Newcastle during 1964.

2. CO-ORDINATION

Within the health department there is an effort to keep a continuous flow of information regarding all children, both healthy and handicapped, who come within the orbit of the health services shortly after birth. In this recording we are much indebted to a close link with the hospital consultants, notably the Orthopaedic Specialist, Mr. A. E. Bremner, the Paediatrician, Dr. R. H. Jackson, and the Infectious Diseases Consultant, Dr. A. E. Paxton. Where mentally handicapped children are concerned, we have to acknowledge the very valuable help of Drs. McCoull and Murray of Prudhoe and Monkton Hospital, and Dr. Kolvin and his subordinates from the Child Guidance Clinic at Tilverlands, Newcastle.

3. SCHOOL BUILDINGS

A complete re-organisation of the local education facilities is in progress, so that schools are being closed, new schools opened and the grouping of children re-arranged in the existing schools. At the same time there is considerable movement of the population as a result of the slum clearance and rehousing activities of the local authority. All this entails considerable difficulty in the follow-up of records in the school medical service and the school medical department is very short of clerical staff at a time when additional filing and recording is being required.

In chronological order the following changes took place:—

Askew Road Primary Infants School was closed, and the children distributed among the following schools:—St. Mary's, St. Cuthbert's and Redheugh, and the Askew Road Special Class closed down and the children were transferred to Victoria Road School. Chester Place Junior School was closed and the children were transferred to St. Cuthbert's School and to Alexandra Road School. St. Joseph's R.C. Secondary School was closed and the children transferred to St. John Fisher School, St. Wilfrid's and St. Aidan's.

Beacon Hill School was opened in October as a secondary modern school for boys and girls, and the following departments closed down—King Edward Secondary School, Prior Street Secondary School, Carr Hill Secondary School and Shipcote Senior Boys and Girls School.

4. SCHOOL MEDICAL INSPECTION

The number of children on the school registers at the end of 1964 was 14,879. Of these, 4,127 were examined at the periodic inspections.

Entrant Group	1,523
Intermediate Group (Born 1954)	1,254
Leaver Age Group (born 1950)	1,271
Additional Periodic Examinations (absentees from previous examinations)	79
	4,127

2,460 (59.6 per cent.), of the parents attended at the periodic examinations.

In addition to the periodic inspection, 8,254 inspections of children were carried out at school or in the school clinics at the request of the parents, teachers, nurses or other persons, or alternatively for the purpose of following up defects already under observation.

5. ASSESSMENT OF GENERAL CONDITION

At the periodic examinations 4,111 children (99.6 per cent.), were classified as of satisfactory nutrition, and in 17 (0.4 per cent.) children their physical condition was considered to be unsatisfactory. This last figure compares with the figure of 30 children last year who were considered to be subnormal in their physical condition.

6. ASCERTAINMENT OF DEFECTS

(a) Cleanliness

At periodic medical inspections no children were found with body lice, 6 had head vermin and 169 were infested with nits. Flea bites were seen on 8 children and 53 were found to be dirty. No children were insufficiently or badly clothed.

39,503 examinations were made by the school nurses of the cleanliness of the children attending the schools. In 1,433 cases infestation was found and of these 730 were sufficiently bad to require a cleansing notice and 44 were the subject of Cleansing Orders.

It is quite unacceptable, in these days of availability of parasiticides, that children should be sent to school infested with vermin or nits, and it is sad to report that a fairly large proportion of the children so affected come from modern houses with bathrooms, hot water and every convenience for the maintenance of personal hygiene. A constant campaign against infestation is waged by the school nurses, who are sometimes treated by the offending parents as if they were responsible for the children's heads being unclean. This is particularly the case when children are rejected by the nurses for the school camps, even although a preliminary inspection is made to give warning to the parents that the children will be rejected if the unclean condition is not rectified.

(b) Skin Conditions

Skin conditions ascertained at routine and special examinations totalled altogether 307.

At the school clinic and in the health centres the following conditions were treated:—

Impetigo	59
Ringworm of the body ..	4
Scabies	
(notifiable disease in Gateshead)	124
Eczema and dermatitis	26
Minor skin conditions	678

(c) Visual Defects

In the Entrant Age Group children are not able to read the test charts but where there is evidence of squint or other need for ophthalmic examination the initial steps are taken. All 8-year old children are tested. Normally, with the discovery of defective vision a notice is sent to the parents informing them that under the National Health Service Act they may have the child's eyesight tested by an ophthalmologist, ophthalmic practitioner or ophthalmic optician. On the card, however, there is a preferential bias towards the testing of the child through the school arrangements. These are excellent due to the fact that there is available the highly skilled services of Mr. Arkle, who, in his retirement from the senior ophthalmologist appointment in the Royal Victoria Infirmary, has been very kind to Gateshead in continuing to do this work. He is able, in this way, to deal with the cases of ocular imbalance or overt squint needing

urgent attention by referring them to his colleagues in the ophthalmic departments of the general hospitals. It is, therefore, comparatively rare nowadays to find untreated squint among the school children, although ambylopic eyes are far from uncommon.

Among the 8-year olds, 1,177 children yielded 147 requiring refraction and 150 others requiring further observation. In the older groups 700 children were found to require eye testing and 119 to be kept under observation. 91 children were found to have squints.

At special inspections, either in school or at the clinics, 224 additional children were found to require refraction and 723 noted to require further observation. Among these 5 suffered from squint. In addition to defects of refraction and squint, 47 cases of external eye disease, such as conjunctivitis and blepharitis, were seen during routine inspections at school, and 90 others were exhibited at special inspections at the clinics. They were referred for treatment.

(d) Nasopharyngeal Disease

In 1980 children defects were found involving the throat at periodic and special inspections. Of these, 111 required treatment and the remainder were kept under observation. Enlarged lymphatic glands were detected in 222 children, of whom 9 were referred for treatment, the remaining 213 being noted for further inspection.

e) Ear Conditions

Otitis Media was present in 66 children, of whom 32 required treatment. Defective hearing requiring treatment was found in 45 children and 32 other children were referred for audiometric testing or further observation. 26 of these children required treatment for cerumen.

(f) Dental Defects

Dental defects were found in 539 children, of whom 32 suffered from extensive caries. Seven of them were noted to have neglected teeth.

(g) Postural Defects

185 postural defects were found, of which 9 were referred for treatment.

Defects of the feet were found in 327 children, of whom 58 required remedial treatment.

Other orthopaedic conditions were noted to require treatment in 28 children, while 123 children were noted for further observation.

(h) Heart Disease and Rheumatism

119 children were recorded as having heart lesions. Of these 15 were referred for treatment and 104 for observation. In most cases, the defects were of minor importance. Five cases of rheumatism were encountered, 2 of which were referred for treatment.

(i) Tuberculosis

As part of the epidemiological investigations systematic tuberculin testing of entrant children is offered, while this is also offered to children in the last years of school attendance before B.C.G. vaccination. The results are given in the accompanying table, from which it will be seen that most of the positive tuberculin tests are the results of B.C.G. immunisation of contacts. Only a very small number of children (only 8% of leavers and 4% of entrants), with positive tests had to be investigated and these were transferred to the Chest Physician and the Paediatrician for an investigation of the family background.

Leaver Groups

Number offered vaccination	2,065
Number accepted	1,945
Number tested	1,779
Number of positive reactors	245*
Number given B.C.G.	1,416
Number sent for x-ray	165

*80 of these had already had B.C.G. vaccination.

The X-ray results were as follows:—

Calcified primary	1
Calcified hilar glands	1
Calcified hilar nodes	—
Calcified neck glands	—
Upper lobe shadowing	—
For observation by Chest Clinic	10
Nil abnormal	130
Did not attend	23
	165

Entrant Groups

	Born 1957/58	1958/59
Number offered tests	162	680
Number accepted	160	593
Number tested	159	515
No. found positive	20	51
No. who had had B.C.G.	19	48
No. sent for x-ray	1	3

X-ray results

The results of x-ray investigations in the four positively reacting children were stated as peribronchial shadowing in 1 case and nothing abnormal in 3 cases.

The Chest Physician supplied the following particulars of notified tuberculosis children on the register:—

Pulmonary Tuberculosis

Infectious	—
Non-infectious	56

Non-Pulmonary Tuberculosis

Joints	1
Other organs	8

At the beginning of 1964, 1 child was undergoing treatment in hospital. During the year, 5 new cases were admitted, 2 cases discharged and 4 undergoing treatment at the end of the year.

(j) Vaccination and Immunisation

1,346, 32.6 per cent. of those examined by routine had been successfully vaccinated against smallpox and 2,728 had been immunised against diphtheria and whooping cough. Many of the younger children had also been immunised against tetanus by use of the triple antigen.

(k) Clothing and Footwear

On the whole these were adequate.

7. SUBSEQUENT EXAMINATIONS

In addition to the periodic examinations, 8,254 examinations were made of school children. Of these, 2,014 were classed as re-inspections, the others being specially seen at the instance of various persons. In connection with the follow-up of previous defects, the school nurses made 671 home visits.

8. ARRANGEMENTS FOR TREATMENT

The local authority services and the hospital specialists available for medical, surgical and dental treatment of school children are listed as follows:—

Greenesfield Health Centre

Minor ailments	Monday — Friday 9 a.m. — 9.30 a.m. and 4 p.m. — 4.30 p.m.
Ultra-Violet Ray Therapy	Mondays, Wednesdays, Fridays — Boys, Tuesdays, Thursdays — Girls, 2 — 4 p.m.
Dental Treatment	Monday — Friday 4 p.m. — 4.30 p.m. and daily by appointment.
Immunisation	Monday — Friday 9 a.m. — 9.30 a.m. and 4 p.m. — 4.30 p.m. (school children). Monday and Wednesday 2 p.m. — 4 p.m. (pre-school children).

Carr Hill Health Centre

Minor ailments	Monday — Friday 9 a.m. — 9.30 a.m.
Dental treatment	Monday — Friday 4 p.m. — 4.30 p.m. and daily by appointment.

Wrekenton Health Centre

Minor ailments	Monday — Friday 9 a.m. — 9.30 a.m.
Dental treatment	Monday — Friday 4 p.m. — 4.30 p.m. and daily by appointment.

Consultant services available by appointment are:—

Ophthalmologist (Mr. J. S. Arkle), Refraction Clinic	Tuesday and Wednesday, 1.30 p.m. — 3.30 p.m.
Orthopaedic Surgeon (Mr. A. E. Bremner)	Alternate Wednesdays, 8.30 a.m. — 9 a.m. at Greenesfield Health Centre.
Dermatologist (Dr. T. Parkin)	At Queen Elizabeth Hospital.
Throat, Nose and Ear Surgeon (Mr. R. G. Chaytor)	At Childrens Hospital.
Psychiatrist (Dr. I. Kolvin)	“Tiverlands”, Clifton Road, Newcastle.
Child Guidance Clinic	
Paediatrician (Dr. R. H. Jackson)	Children's Hospital, Dryden Road, Gateshead.

(a) **Cleanliness**

The heads of 61 children, in respect of whom cleansing notices had been issued without corresponding action by the parents, were cleansed by the nursing auxiliaries in the clinic. There were also a number of children cleansed by the nursing auxiliaries in instances where the parents were ignorant or physically or mentally incapable of doing the job properly. The cleanliness of a large number of children was assisted by the issue of cleansing lotion and the loan and sale of nit combs. The cleansing lotion is ordered in bulk, is put up in 2 oz. bottles with special labels and instructions, and sold at a price of 1/- (including 2d. for the bottle, which is returnable). This medicament is also issued free to families where there is known to be financial hardship. In 1964, approximately 1,500 bottles of parasiticide were so dispensed and, of course, the lotion is also used in the clinic. 312 Tubes of anti-parasitic cream were also issued for cleansing purposes during the year at a price of 1/8d. per tube.

(b) **Treatment of Minor Ailments and Diseases of the Skin**

The number of children attending the clinics for treatment has decreased. Those who attended for treatment were:—

	<i>No. attending</i>	<i>No. treatments</i>
Ringworm, Scalp	—	—
Ringworm, Body	4	10
Scabies	136	275
Impetigo	62	190
Other skin conditions	661	309
External eye conditions	152	300
Otitis media	47	128
Other ear conditions	55	73
Miscellaneous conditions	717	1,312
	<u>1,834</u>	<u>4,597</u>

(c) **Treatment of Ophthalmic Defects**

107 sessions were given by Mr. J. S. Arkle and 1,024 children were seen. Glasses were prescribed for 650 children and 204 were found to be already wearing suitable glasses. The remaining 170 did not require glasses.

Errors of refraction found were:—

Hypermetropia	197
Myopia	161
Hypermetropic astigmatism	134
Myopic astigmatism	73
Irregular astigmatism	—
Compound myopic astigmatism	109
Compound hypermetropic astigmatism	447
Mixed astigmatism	100
Emmetropia	25

In addition to these, the following defects were recorded:—

Strabismus	122
Cataracts	1
Nystagmus	2
Marcus Gonn Syndrome	1
Posterior polar cararacts	1
Dyslexia	1
Conjunctival irritation	1
Migraine	1
Corneal opacity	6
Dislocated lenses	1

During the year refraction was offered without undue delay.

Orthoptic Clinic

There were no orthoptic sessions during the year due to lack of staff. The children who required such treatment were diverted to other hospitals as far as possible. 44 children were admitted to the Fleming Memorial Hospital for squint correction, and there was one on the waiting list for admission at the end of the year.

(d) Throat, Nose and Ear Defects

At the Children's Hospital there were 205 tonsillectomies and 7 other operations for conditions of the nose and throat. 9 children were operated on for ear disease. The school medical officers dealt with 26 cases of chronic otorrhoea, and with 20 cases requiring treatment for impacted wax.

(e) Treatment of Dental Defects

Report of the Principal Dental Officer

Staff

At the close of the year the staff of the dental department consisted of the principal dental officer and three full-time dental officers, four dental surgery assistants and one clerk, the laboratory being staffed by one senior dental technician-in-charge and one senior dental technician. Mr. R. Robson, a dental officer, was appointed on 6th January, 1964.

As in previous years, approximately two-thirds of the dental officers' time was devoted to the treatment of school children, the remaining one-third being given to the priority services.

Dental Treatment

The output of the dental department was slightly higher than that of the previous year, although the dental officer strength decreased by 0.26 to 2.4. The percentage of children found to require treatment, including specials, was 52.2% and excluding specials almost 49%, a decrease of 6.6% and increase of 1.9% respectively. The percentage of children accepting treatment is 75.4%. There is still much evidence that more and more children are receiving routine dental treatment from private practitioners and from a much earlier age than before. The number of x-rays taken for children was 73, and the number of dentures fitted was 39 and three repaired dentures.

I would like to thank the staff of the dental department for their work during the year, and the schools' staff for their help and co-operation.

Part IV summarises the dental treatment given to school children during the year.

J. WHITEHOUSE,

Principal School Dental Officer.

(f) Orthopaedic and Postural Defects.

17 new cases attended for the first time the orthopaedic consultation clinics held by Mr. A. E. Bremner, F.R.C.S. In addition, he re-examined 33 cases he had previously seen.

The types of lesions found were as follows:—

<i>Defects</i>	<i>New cases</i>	<i>Old cases</i>	<i>Visits</i>
Foot defects	9	15	38
Sequelae to poliomyelitis	—	3	6
Torticollis	—	1	1
Scoliosis	1	3	8
Erb's palsy	—	1	4
Shortening of leg	—	1	1
Wasting of arm	—	1	1
Pain in knee	—	1	1
Kypholordosis	—	1	1
Genu valgum	1	2	4
Pigeon chest	2	—	3
Amputation	—	1	2
Cavity of lower sternum	1	—	2
Short neck	—	1	2
Nil abnormal	3	2	6
	<u>17</u>	<u>33</u>	<u>80</u>

Physiotherapy

There being no facilities, all the arrangements at the “Cedars” Special School, Joicey Road Open Air School and the Greenesfield Health Centre were abandoned after March. Every effort was made to find a successor to Mrs. Rose, who left in March, but without success.

The Remedial Gymnast, Mr. T. D. Midgley, on the staff of the Gates-head Hospital Management Committee, is so much in demand in the hospital service that he was only able to give two half-day sessions per week. Nevertheless, the following individual and class treatments were given:—

INDIVIDUAL TREATMENTS

<i>Conditions</i>	<i>Patients</i>	<i>Treatments</i>
Mild spastic	1	10
Fracture of femur	2	14
Condylar fractures	2	10
Tendon transplant	1	10
Torticollis	1	14
Talipes	12	223
	<u>19</u>	<u>281</u>

FOOT, ANKLE AND TOE DEFECTS

	<i>Patients</i>	<i>Treatments</i>
Pes planus	14	101
Pes valgus		
Hallux valgus		

(g) Ultra-Violet Ray Therapy

Courses for ultra-violet ray treatment were given for the following conditions:—

Acne	8
Alopecia	2
Bronchitis	1
General debility	2
Recurrent cough	2
Psoriasis	2
Nasal catarrh	1
Recurrent respiratory infection	1
Recurrent tonsillitis	1
Anorexia	1

9. INFECTIOUS DISEASES AND IMMUNISATION

Infectious diseases coming to light among school children by notification or information from the school welfare officers are listed as follows:

Measles	334
Scarlet fever	80
Whooping Cough	7
Pneumonia	6
Dysentery	11
Scabies	86
Virus encephalitis	2
Infective hepatitis	29
Tuberculosis—respiratory	8
Tuberculosis—other	4

Booster doses of combined diphtheria and tetanus prophylactic were administered to 636 school entrants who accepted the offer. 318 others received a complete course of prophylaxis against diphtheria and tetanus. 8 children completed a full course of combined prophylaxis at the clinics and 19 were immunised against tetanus only. In addition 47 ‘booster’ doses of tetanus toxoid were given. The general practitioners completed 20 immunisations against diphtheria, pertussis and tetanus, 7 courses of prophylaxis against diphtheria, vaccinated 13 school children and re-vaccinated 19 others. In addition, they gave 39 ‘booster’ doses of diphtheria and tetanus toxoid. 11 children were vaccinated against smallpox by the school medical staff.

Poliomyelitis Vaccination

Using Sabin Oral Vaccine, 48 school children were completely immunised against poliomyelitis, 11 through the school service and 37 by the general practitioners. 28 children were given 3rd ‘booster’ doses of oral polio’ vaccine after previous Salk immunisation. Of the latter, 6 were given by school medical staff and 22 by family practitioners. 27 children were given 4th ‘booster’ dose of oral polio’ vaccine after a complete course of Salk immunisation, 7 by the medical staff and 20 by the family practitioners.

10. PHYSICAL EDUCATION

Until this year, the report of the Organiser of Physical Education was included by instruction of the Education Committee in the School Medical Report. It now has been arranged that the Organiser’s report should cover the scholastic year and in consequence it is submitted separ-

ately to the Education Committee. From the school medical officer's point of view, the bulk of the physical education has little medical interest but the children of the special schools have enjoyed swimming activities which are provided through the physical education service.

11. CO-OPERATION WITH OTHER AGENCIES

The Director of Education, Mr. Howard, the Deputy Director, Mr. F. A. Stokes, and other administrative staff have been most helpful in furthering the aims and organisation of the school medical service. Head teachers and class teachers have been of great assistance in smoothing out the arrangements for medical inspection and in bringing to notice for special examination difficulties they encountered with pupils who might be suffering from remedial defects. The school welfare officers are all particularly valuable in drawing our attention to the illnesses that caused the absences from school, where these were due to non-notifiable infestious diseases, such as chickenpox, mumps and German Measles, and the value of this help must be acknowledged with appreciation.

From time to time, it is unfortunately necessary for the school medical and nursing service to work in close collaboration with the Inspector of the N.S.P.C.C., where the health of children is being neglected or where children are being treated cruelly, similarly, the Children's Department of the Local Authority has worked in very close liaison indeed with the Health Department officers in matters of common concern.

12. HANDICAPPED PUPILS

The following children were found to be requiring special education in 1964:—

Blind	—
Partially sighted	—
Deaf	—
Partially deaf	1
Physically handicapped	9
Delicate	34
Maladjusted	—
Educationally subnormal	52
Epileptic	—

Details relating to the education of the handicapped children ascertained by the school medical service are as follows:—

Category	No. on Register	No. in Ordinary School	No. in Special Schools		No. on Waiting List for Special Schools		Not attending any school
			Day	Residential	Day	Residential	
Blind	6	—	—	6	—	—	—
Partially sighted	2	1	—	1	—	—	—
Deaf	19	—	15	4	—	—	—
Partially deaf	17	15	2	—	—	—	—
Educationally subnormal	213	186	—	25	—	2	—
Epileptic	34	31	3	—	—	—	—
Maladjusted	6	—	—	3	—	3	—
Physically handicapped	42	—	33	7	—	—	2
Delicate	91	—	91	—	—	—	—

75 children were in special classes for E.S.N. pupils in ordinary schools, i.e. 40 juniors and 35 seniors.

Blind and Partially Sighted Children

All six blind children and one partially sighted child have been placed in special residential schools. One partially sighted child, however, has been given the benefit of Grammar School Education and continues, under ophthalmic supervision, to follow the curriculum.

Deaf and Partially Deaf

Of the 19 deaf children 15 attend special day schools and 4 are having special residential school education. Partially deaf children are being educated in ordinary schools to the number of 15, all of whom have been equipped with hearing aids, while 2 others, also supplied with hearing aids, attend the Open Air School because of other defects.

Educational Subnormality

During 1964, 126 children were assessed as to their mental equipment by the medical officers. The following recommendations were made:—

Recommended admission to special class	..	.....	52
„ to remain in ordinary school	.....	.....	50
„ supervision on leaving school	...	...	15
„ no supervision on leaving school	.....	.....	1
„ admission to residential school	....	.....	2
„ help in occupational centre	..	..	1
„ to stay in special class	.....	.....	2
Referred to child psychiatrist	.....	.....	3
			126

In addition 16 children from other authorities were examined at Hindley Hall Special School before leaving.

75 children regarded as of educational subnormality attend special classes in ordinary schools. There is one infants' class at Victoria Road School, one junior class at Sunderland Road and two senior classes at High West Street.

Epileptic Children

Most of the handicapped pupils subject to epilepsy have suppressive medication through their own doctor, and no fewer than 31 attend ordinary school without any interference with the curriculum. 3 other children suffering from other defects attend special schools and follow the normal curriculum.

Maladjusted Children

6 children with emotional disturbances have come to notice and 3 of these have been placed in residential special schools. Three others are on the waiting list for the appropriate schools and meantime attend ordinary schools.

Physically Handicapped

Our own special schools, the Joicey Road Open Air School, and the “Cedars” Special School for Physically Handicapped Children, have been able to accommodate most of the physically handicapped, but there are also a number of children, mainly spastics, who are educated at the Percy Hedley Special School. One other child who has been hospitalised since infancy is being educated at a special school in the Midlands.

Delicate

91 children in this category are all in attendance at the Open Air School.

JOICEY ROAD OPEN AIR SCHOOL (Report of Dr. P. C. Barry)

The number of children attending the school during the year under review showed a small reduction compared with the number for the preceding year.

The trend which had been established in recent years and is best exemplified by the falling admission rate has therefore continued in 1964. It points to a continued improvement in the health of the younger members of the community of the borough, which must manifest itself in the community as a whole in the years ahead.

At the beginning of the year, there were 102 children on the school register, of whom 54 were boys and 48 were girls.

16 boys and 12 girls were admitted during the year, whilst 20 boys and 17 girls were discharged. The fluctuations resulted in the total on the school register at the end of the year being 93 children, of whom 50 were boys.

Two of the children admitted during the year came from outside the Borough, by arrangement with another authority.

The 37 children who left the school during the year were disposed of as follows:—

1 boy and 1 girl	To Selective Secondary Schools
1 boy and 2 girls.....	To other Local Education Authorities
4 boys and 3 girls	To Special Schools
11 boys and 9 girls	To normal schools
3 boys and 2 girls	Reached School leaving age.

As can be seen from this table, all but 7 children who went to Special Schools were discharged fit to take their place appropriate to age in the community. The proportion of boys and girls in the school remains remarkably constant from year to year in the approximate ratio of 9 : 8. This is just found to be so and no satisfactory explanation of the cause is offered.

Children continued to be admitted to the school for a variety of reasons, and for more than one reason in many cases. There are many examples in the school of children with a “problem” factor in addition

to the malady. In such cases doubt must exist as to whether the malady or the problem predominates. It is therefore considered that a tabulated breakdown of the admissions to the school by causes would serve no useful purpose, and being liable to mislead the reader, is not presented. It is worthy of mention, however, that a high percentage of those admitted are delicate and debilitated and have, or have had, disease of the respiratory system.

As the health of the children of the Borough improves so the number of admissions to the school purely on the grounds of delicacy must decrease. This is a highly desirable state of affairs leading to the inevitable conclusion "That there is a lessening need for the school to fulfil the purpose for which it was originally intended."

Many of the children coming to the school, of whom some remain for a considerable time, are not ideally suited to its requirements nor it to theirs, but their admission has been at least expedient and their retention the most suitable arrangement readily available. Some of these are the problems. Unlike the delicate, who usually show improvement even if slowly and are in due course discharged, the problems appear to be less amenable to solution so those in that category tend to stay on. The result is that with the passage of time the proportion of problem children continues to rise as the total number in the school decreases. This is regrettable and hardly in line with the policy of the founders.

The normal activities and relaxations which are features of the school continued as in former years. Not only was the health of the school satisfactory throughout, but the year can be regarded as a most successful one in the diverse spheres of scholarship, culture and aquatics. Credit is due to all concerned in these successes and not least to the staff, without whose efforts, often in the face of adverse factors, little would have been achieved.

The policy of close liaison with parents has been continued, and they are frequently invited to visit the school in order that they may discuss with the teaching and medical staff the health and welfare of their children. Certainly from the medical point of view these visits are invariably beneficial to the children and would be even more so if at all times the full co-operation of parents was received.

I mentioned in last year's report that "those who have attended regularly have reaped the most benefit from the school". I make no apologies for the repetition and feel that on the subject of absenteeism I can only best express my opinion by striking a discordant note. There is a minority of roughly 12 children in the school whose attendance has been very bad. Much effort, not infrequently fruitless, is put into the task of eliciting the causes of absences. There is a variety of reasons, the main legitimate one being illness, for absence from school. It is found that not infrequently, but by no means invariably, absence is due to illness and may or may not be substantiated by certification. There are, however, occasions when illness as the cause of absence is not established and sometimes there is good reason to believe that absence is due to failure on the part of certain parents to send the children to school when there are no legitimate grounds for the non-attendance.

MINOR AILMENTS TREATED IN 1964

Impetigo and Septic Sores	11
Eczema and Dermatitis	11
Other skin conditions	172
Conjunctivitis	12
Other eye conditions	10
Otitis media	10
Other ear conditions	6
Miscellaneous	173

“THE CEDARS” SPECIAL SCHOOL (Report of Dr. M. Harrison)

At the end of 1964 there were 48 pupils, of whom 10 boys and 7 girls were resident, and 27 boys and 4 girls attended daily. 34 children came from Gateshead, 2 from Northumberland, 2 from Newcastle, 9 from Durham County and 1 from South Shields.

There is an increasing demand for places at the school and it is not possible to admit children who are educationally subnormal. Those who are backward due to lack of education require much individual guidance, and because of the great range of ability in each age group there is still a need for additional teaching help.

Handicaps affecting the children at school included cerebral palsy, post polio paralysis, spina bifida, hydrocephalus, osteomalacia, Friedreich's Ataxia, muscular dystrophy, Perthe's disease, post traumatic debility, bronchiectasis, bronchitis, asthma, congenital heart disease, coeliac disease, fibrocystic kidneys, progeria and partial sight.

Discharges

4 children were discharged to ordinary schools and 1 to home teaching. 1 boy of school leaving age began work and another was awaiting further hospital treatment.

Persistent efforts have been made to ensure training for 2 pupils due to leave this year but vacancies in hostels and training centres are very hard to find. There appears to be a great need for additional training schemes and employment for handicapped pupils.

Physiotherapy and Speech Therapy

For most of the year it has been impossible to provide these special treatments but it is hoped that a physiotherapist will attend again soon. At least 7 children require speech therapy and 25 require physiotherapy.

Swimming

Once again we thank the instructor and staff at the swimming bath who helped the children so much that amongst them they obtained 2 silver medals for personal survival, 1 bronze medal, and certificates respectively for $\frac{1}{2}$ mile (1), $\frac{1}{4}$ mile (5), 100 yards (5), 25 yards (3). These awards were presented by Alderman C. H. Wheatley at the annual gala to which members of the Education Committee were invited.

Only 16 of the children are at present able to attend the Mulgrave Bath. A specially adapted pool at the Cedars would give nearly all the pupils, including many severely handicapped ones, an opportunity to enjoy this ideal form of exercise.

Other Activities

At the Gateshead Schools Musical Festival and at the Carol Festival many of the Cedars children took an active part in singing and recorder playing including one recorder soloist.

During the summer there was a visit to a farm at Shotley Bridge, and a boat trip down the Tyne, and a visit to Otterburn. There were visits to the Children's Theatre, the Scottish Children's Theatre, the Girls' Grammar School play, the Mayor's Children's party and a party given by the Low Fell Congregational Church.

Members of the Thomas Wilson club brought Father Christmas to the party at the Cedars and gave some fine presents including a small billiard table. This table is greatly appreciated by the older boys, whom Mr. Hornsby, the caretaker, has kindly been instructing in its use.

Parents were invited to an open day in the summer, at the Harvest Festival and at a Christmas carol service and concert. After the Harvest Festival some of the children helped to take gifts to old people. At the concert we had valuable assistance from the drama organiser, Miss Wright.

The resident children enjoy Guides, Brownies, Scouts and Cubs, and the boys also visit the local Life Boys Brigade.

It has been a busy year at the school with the maximum intake of pupils but every effort has been made to give these handicapped children as full a life as possible. Every effort is also made to speed the return of these children to ordinary schools and most especially is this essential with the older boys.

HINDLEY HALL FOR EDUCATIONALLY SUBNORMAL PUPILS

(Report of Dr. J. M. Bainbridge)

During the year the full quota of 60 boys has been maintained.

School Leavers

26 boys left the school, 12 on attaining school leaving age, 3 were committed to approved schools, 11 were removed by their own Authorities for various reasons.

Health

A high standard of health was maintained. A school medical officer has visited the school at regular intervals. The general practitioner has attended at least once weekly. Dental inspection and treatment has been given by Gateshead school dental officers.

School Activities

The various groups catering for model making, woodwork, leatherwork, weaving, basketry, stamp collecting, sports and athletics, etc., have enjoyed a full programme. Visits have been made to a number of places of interest and entertainment, and as usual bonfire celebrations and Christmas parties have been enjoyed by all. The School Army Cadet Company continues to flourish.

Church Attendance

Church of England boys continue to attend St. Margaret's Church and our Roman Catholic boys are instructed by visiting clergy from the Passionist Monastery at Minsteracres.

Staffing

Domestic staff has maintained full strength throughout the year. Teaching and supervisory staff has also maintained full strength throughout the year.

Pupils Educated Outside the Borough

Children in residential schools not maintained by the Local Authority are:—

Deaf	—	—	}	20
Partially deaf	...	—		
Blind	—	—		5
Partially blind	...	.....		2
Physically handicapped	—	—		6
Epileptic	—	—		1
Educationally Subnormal	..	..		13
Maladjusted	—	—		3

The above pupils attend the following schools:—

Deaf and Partially Deaf:

St. John's Boston Spa	3
Northern Counties, Newcastle	16
Burwood Park School, Walton on Thames Surrey	1

Blind and Partially Blind:

Royal Victoria School for the Blind,	Newcastle	3
St. Vincent's School, Liverpool		1
Preston School for Partially Sighted		1
Royal Normal College, Shrewsbury		2

Physically Handicapped

Percy Hedley School, Newcastle	.....	....	5
St. Rose's Special School, Stroud	.....	.....	1

Epileptic

Sedgewick House Residential School 1

Educationally Subnormal

Jesmond Dene House, Special School	...	10
Dinsdale Park School, Darlington	.....	1
Pontville R.C. School, Ormskirk	.. ..	2

Maladjusted

Red Hill School, East Sutton	...	1
St. George's House, East Grinstead	....	1
Pitt House School, Torquay	....	1

Higher Education of Blind, Deaf and Defective Children

There are no pupils in this category.

Speech Therapy

No speech therapy was carried out in 1964, due to complete absence of staff.

13. ARRANGEMENTS FOR THE PROVISION OF MEALS

The school meals service is able to supply all demands for mid-day meals. 5,728 mid-day meals were provided daily, and 12,831 children received the daily ration of milk, a figure slightly more than last year.

14. NURSERY SCHOOLS

The provision for nursery education of children is made up of the following:—

1-	Bensham Nursery School	40 places
2-	Prior Street Nursery Class	30 places
3-	Brighton Avenue Nursery Class	30 places

During the year the average attendance was 87.8.

A small number of children attended the nursery school for assessment as to educability. 5 of these proved to be unsuitable and 3 of them were admitted to the junior training centre.

Regular medical visits were paid to the children in the nursery schools and on the whole the health of the children was satisfactory.

15. DUKESHOUSE WOOD CAMP SCHOOL, HEXHAM

During the nine months of the year, approximately April to December, parties of Gateshead senior school children spend a period of two weeks at this school.

A resident nurse deals with minor ailments. She treated 1,130 children and reported that 2,436 treatments were given. In addition 28 children were admitted to the sick bay and 4 children were admitted to hospital, one with laceration of scalp, 1 with laceration of knee, 1 with laceration of finger and 1 with burns.

16. HIGHER EDUCATION

Those pupils born in 1949 attending the Grammar Schools were given routine examinations.

Among the 281 pupils examined the following conditions were found:

	<i>Requiring treatment</i>	<i>Requiring observation</i>
Eye defects	103	22
Orthopaedic defects	7	52
Skin defects	6	20
Miscellaneous defects	17	108
	<u>133</u>	<u>202</u>

17. MISCELLANEOUS

There were 3 deaths in children of school age during the year. The causes of death were:—

Cerebral tumour	1
Motor vehicles accidents (pedal cycles)	2

Additional examinations during the year by school medical officers were:—

Under Employment of Children Bye-laws	75
Of Boarded-out children (for Children's Officer)	50
Children and Young Persons Act	—
Candidates for the Teaching Professions	57

MINISTRY OF EDUCATION INSPECTION RETURNS

Part I

Medical Inspection of Pupils attending Maintained Primary and Secondary Schools (including Nursery and Special Schools)

Table A. Periodic Medical Inspections

Age Groups inspected (by year of birth)	No. of Pupils inspected	Physical condition of Pupils Inspected			
		No.	Satisfactory	No.	Unsatisfactory
			Total % of col. 2		Total % of Col. 2
(1)	(2)	(3)		(4)	
1960 and later					
1959	1,142	1,141		1	
1958	381	380		1	
1957	26	26		—	
1956	7	7		—	
1955	7	7		—	
1954	1,254	1,247		7	
1953	31	31		—	
1952	6	6		—	
1951	2	1		1	
1950	938	931		7	
1949 and earlier	333	333		—	
Totals	4,127	4,110	99.59	17	0.41

Age Groups inspected (by year of birth)	No. of Pupils Inspected	Pupils found to require treatment (excluding dental diseases and infestation with vermin)		
		For defective vision (excluding squint)	For any other condition recorded at Part II	Total Individual pupils
		(6)	(7)	(8)
1960 and later				
1959	1,142	38	168	185
1958	381	13	50	52
1957	26	1	3	4
1956	7	3	1	3
1955	7	2	—	2
1954	1,254	262	169	384
1953	31	10	7	14
1952	6	1	—	1
1951	2	—	—	—
1950	938	256	124	340
1949 and earlier	333	114	40	137
Totals	4,127	700	562	1,122

Table B. Other Inspections

Number of special inspections	6,234
Number of Re-inspections	2,016
	<u>8,250</u>

Table C. Infestation with Vermin

(a) Total number of individual examinations of pupils in schools by school nurses or other authorised persons	39,533
(b) Total number of individual pupils found to be infested	1,433
(c) Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act, 1944)	739
(d) Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education Act, 1944)	44

Part II

Defects found by Medical Inspection during the year

Table A. Periodic Inspections

Defect Code No.	Defect or Disease	Periodic Inspections							
		Entrants		Leavers		Others		Total	
(1)	(2)	(T)	(O)	(T)	(O)	(T)	(O)	(T)	(O)
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
4. Skin		46	59	40	56	44	32	30	146
5. Eyes—									
	a. Vision	53	4	370	41	277	74	700	119
	b. Squint	54	7	7	—	30	—	91	7
	c. Other	5	7	10	14	9	3	24	24
6. Ears—									
	a. Hearing	12	7	5	4	8	12	25	23
	b. Otitis Media	16	22	3	4	6	4	25	30
	c. Other	5	37	3	14	1	26	9	77
7. Nose and Throat		42	353	23	157	23	224	88	734
8. Speech		14	44	1	8	—	5	15	57
9. Lymphatic Glands		5	103	1	43	2	44	8	190
10. Heart		6	27	3	33	3	35	12	95
11. Lungs		11	52	11	23	9	23	31	98
12. Developmental—									
	a. Hernia	4	6	—	—	2	1	6	7
	b. Other	3	54	5	25	2	56	10	135
13. Orthopaedic—									
	a. Posture	1	45	4	41	3	81	8	167
	b. Feet	19	74	20	74	6	79	45	227
	c. Other	6	51	13	30	7	34	26	115
14. Nervous System—									
	a. Epilepsy	2	1	2	—	2	—	6	1
	b. Other	2	6	3	7	21	17	26	30
15. Psychological—									
	a. Development	2	50	4	10	22	23	28	83
	b. Stability	1	25	1	95	1	88	3	208
16. Abdomen		—	1	7	2	1	1	8	4
17. Other		12	8	20	41	4	43	36	92

Table A. (cont'd) Special Inspections

Defect Code No.	Defect or Disease	Special Inspections	
		Pupils requiring treatment (3)	Pupils requiring observation (4)
(1)	(2)		
4. Skin		25	6
5. Eyes—			
	a. Vision	144	42
	b. Squint	3	—
	c. Other	6	—
6. Ears—			
	a. Hearing	20	9
	b. Otitis Media	7	4
	c. Other	8	9
7. Nose and Throat		23	135
8. Speech		15	26
9. Lymphatic Glands		1	23
10. Heart		3	9
11. Lungs		4	4
12. Developmental—			
	a. Hernia	—	3
	b. Other	1	21
13. Orthopaedic—			
	a. Posture	1	9
	b. Feet	13	42
	c. Other	2	8
14. Nervous System—			
	a. Epilepsy	4	—
	b. Other	—	2
15. Psychological—			
	a. Development	53	33
	b. Stability	—	1
16. Abdomen		6	—
17. Other		4	17

Part III

Treatment of Pupils attending Maintained Primary and Secondary
Schools (including Nursery and Special Schools)

Table A. Eye Diseases, Defective Vision and Squint

	<i>Number of cases known to have been dealt with</i>
External and other, excluding errors of refraction and squint	155
Errors of refraction (including squint)	1,024
Total	1,179
Number of pupils for whom spectacles were prescribed ...	854

Table B. Diseases and Defects of Ear, Nose and Throat

	<i>Number of cases known to have been dealt with</i>
Received operative treatment—	
(a) for diseases of the ear	9
(b) for adenoids and chronic tonsillitis	205
(c) for other nose and throat conditions	7
Received other forms of treatment	116
Total	337

Total number of pupils in schools who are known to have been provided with hearing aids—

(a) In 1964	2
(b) In previous years	18

Table C. Orthopaedic and Postural Defects

	<i>Number of cases known to have been treated</i>
(a) Pupils treated at clinics or out-patients departments	264
(b) Pupils treated at school for postural defects	—
Total	<u>264</u>

Table D. Diseases of the Skin

	<i>Number of cases known to have been treated</i>
Ringworm—(a) Scalp	
(b) Body	4
Scabies	136
Impetigo	62
Other skin diseases	661
Total	<u>863</u>

Table E. Child Guidance Treatment

	<i>Number of cases known to have been treated</i>
Pupils treated at Child Guidance clinics	13

Table F. Speech Therapy

	<i>Number of cases known to have been treated</i>
Pupils treated by speech therapists	—

Table G. Other Treatment Given

	<i>Number of cases known to have been dealt with</i>
(a) Pupils with minor ailments	740
(b) Pupils who received convalescent treatment under School Health Service arrangements	16
(c) Pupils who received B.C.G. vaccination	1,416
(d) Other than (a), (b), and (c) above—	
Appendicectomy	33
Herniotomy	10
Total	<u>2,215</u>

Part IV

Dental Inspection and Treatment carried out by the Authority

(a) Dental and Orthodontic Work

1. Number of pupils inspected by the Authority's Dental Officers:—			
(i) At Periodic Inspections	12,811	} Total (1)	13,470
(ii) As Specials	659		
2. Number found to require treatment			7,026
3. Number offered treatment			7,026
4. Number actually treated			5,304

(b) Dental Work (other than orthodontics)

1. Number of attendances made by pupils for treatment, excluding those recorded at (c) 1 below			7,728
2. Half days devoted to:—			
(i) Periodic (School) Inspections	82	} Total (2)	1,435
(ii) Treatment	1,353		
3. Fillings:—			
(i) Permanent Teeth	2,809	} Total (3)	3,451
(ii) Temporary Teeth	642		
4. Number of Teeth Filled:—			
(i) Permanent Teeth	2,453	} Total (4)	3,079
(ii) Temporary Teeth	626		
5. Extractions:—			
(i) Permanent Teeth	659	} Total (5)	3,099
(ii) Temporary Teeth	2,440		
6. Administration of general anaesthetics for extraction			1,359
Number of half days devoted to the administration of general anaesthetics by:—			
(a) Dentists	—	} Total (6)	96
(b) Medical Practitioners	96		
7. Number of pupils supplied with artificial teeth			39
8. Other operations:—			
(i) Crowns	—	} Total (8)	2,258
(ii) Inlays	—		
(iii) Other Treatment	2,258		

(c) Orthodontics

(i) Number of attendances made by pupils for orthodontic treatment	767
(ii) Half days devoted to orthodontic treatment	79
(iii) Cases commenced during the year	35
(iv) Cases brought forward from the previous year	49
(v) Cases completed during the year	12
(vi) Cases discontinued during the year	13
(vii) Number of pupils treated by means of appliances	32
(viii) Number of removable appliances fitted	98
(ix) Number of fixed appliances fitted	—
(x) Cases referred to and treated by Hospital Orthodontists	—

